DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10003836-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which

the specification of wh	ich is attac	ched hereto unless t	he following box is	checked:		
() was filed on	was filed on as US Application No. or PCT International Application					
			ed on			
	s amended	l by any amendmen	it(s) referred to abo	e above-identified specification ve. I acknowledge the duty to CFR 1.56.		
	y benefits un below and ha	der Title 35, United Star ve also identified below a	any foreign application fo	any foreign application(s) for patent or patent or nventor(s) certificate havin		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S C 119		
N/A				YES NO		
				YES NO.		
Provisional Application I hereby claim the benefit u below:		United States Code Sec	ction 119(e) of any Unite	d States provisional application(s) liste		
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Inventor's Signature

Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10003836-1

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Inventor's Signature	3/2	7 - No Date	2001		
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Residence:					
Post Office Address:		/			
Iñventor's Signature		Date			
Full Name of # 4 joint inventor:			Citizenship:		
Residence:					
Post Office Address:					
្រីinventor's Signature ្វី ៕		Date			
Full Name of # 5 joint inventor:		, , , , , , , , , , , , , , , , , , , 	Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 6 joint inventors	:		Citizenship:		
Residence:			·		
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 7 joint inventor	:		Citizenship:		
Residence:					
Post Office Address:		· · · · · · · · · · · · · · · · · · ·			
Inventor's Signature		Date			
Full Name of # 8 joint inventor	ri.		Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			